

Forest Practices Application/Notification Office Checklist Page 1 Northwest Region

FPA/N#:	2815964
	DHIN

Received Date:

WDFW Concurrence Due Date:

WDFW Concurrence Review

Completed:

FP Forester:

Comments Due Date:

9 3

Decision Due Date:

5K420

Shutdown Zone:

RMAP #:

FPA/N CLASSIFICATION: [] II MIII []IVG [IVS Biomass [] FFFPP [] 20-acre exempt []
Transcation [] in Min [] it d [
Landowner Name: SA/	Project Name: Exy Street Spray
WRIA: Indomosto	WAU: Denay Crack
WRIA:	WAU:
WRIA:	WAU:
Legal Description: 13 24 18 8 E; 18	19-28-9 County: Snotromish
Activity Type: Harvest	ac Spray 65 Stream Crossing(s)
Road	Road Rock Pitac
Construction	_ft Abandonmentft Spoilscy
ALTERNATIVE PRESCRIPTIONS	
[] Alternate Plan	[] Habitat Conservation Plan
[] Ten-Year Forest Management Plan	[] Landowner Option Plan for Northern Spotted Owl
[] Columbia River Gorge National Scenic Area	[] Cooperative Habitat Enhancement Agreement
[] Watershed Analysis:	
RESOURCE REVIEW	
[] Unstable Slopes (Risk: Highway, Water;	\ [] Bull Trout Overlay
[] Soils Map (Highly Erodible & Very Unstable) [] Bull Trout Overlay) [] HCP Bull Trout Population
[] SLPSTAB	[] Bald Eagle nest or roost within 660 feet
[] Landslide Hazard Zonation	[] Group A or B Water Supply
[] Landslide Inventory Polygon	[] Hatchery (Name:)
[] Rain-on-Snow and Outside Approved WA Hydric Soils	[] Even-Aged Harvest greater than 120 Acres
[] Wetland [] Forested, [] A, [] B	[] Ground-based Equipment on Slopes greater than 40%
[] In WMZ of [] A, or [] B Wetland	[] Road Construction on Slopes greater than 65% [] Saltwater Islands (Name:)
[] In RMZ/ELZ of Type [] S, [] F, [] N water	[] In or Over Typed Water
[] Water Verification	[] Volume greater than 5 mbf per acre
ASSOCIATED NON-SCANNED DOCUMENTS - C	On file with the FPA/N at the Region office.
[] SEPA Checklist/Documents	[] Large Landowner Road Maintenance and Abandonment Plan
ASSOCIATED SCANNED DOCUMENTS	
Onversion Option Harvest Plan	[] Hardwood Conversion Form
FPHP Plans & Specifications	[] Wetland Mitigation Plan
[] Qualified Expert Report; Type: [] Natural Regeneration Plan	[] Water Protocol Surveys
Shoreline Permit	[] Modification Form#
] Marbled Murrelet Form	[] Shade Documentation (Stream Shade Assessment Worksheet)
] FPBM Appendix(s)	[] Watershed Analysis Worksheet
Small Landowner RMAP Checklist	[] DFC Printout
CMZ Assessment Form	[] Slope Stability Informational Form
ARR Tax Credit [] Yes 💢 No	Form completed by 3-4.
DDITIONAL COMMENTS:	

KEY FOR EVALUATION OF SITE SPECIFIC USE OF AERIALLY APPLIED PESTICIDES

Question	Question	Resp	Action
I (a)	Is the pesticide on the pesticide list (WAC 222-16-070(1))?	150	go to 2
		No	go to 1(b)
I (b)	Is the pesticide being used under a Dept of Agriculture Experimental Use	Yes	Class III
	Permit (WAC 16-228-1460)?	No	Class IV Sp
2	Is the toxicity rating for the pesticide to be used "Danger - Poison" as	Yes	Class IV Sp
<u>-</u>	designated in the pesticide list (WAC 222-16-070(1)(b))?	No	go to 3(a)
3 (a)	Is Bacillus thuringiensis (BT) the only pesticide being used on this application?	Yes	go to 3(b)
	i	No	go to 4(a)
3 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or	Yes	Class IV Sp
	critical habitat (State) of a species within the application area that is susceptible	No	Class III
F.	to the BT strain being used?		
4 (a)	Is this operation occurring over ground water with a high susceptibility to	Yes	go to 4(b)
	contamination as specified in EPA 910/ 9-87-169 or in documentation provided	No	go to 5(a)
	by the department of ecology?	ŀ	
4 (b)	Is this pesticide a state restricted use pesticide for the protection of ground	Yes	Class IV Sp
	water under WAC 16-228-1231?	No	go to 5(a)
5 (a)	Is the operation adjacent (within 100 ft.) of surface water?	(es)	go to 5(b)
		No	go to 5(e)
5 (b)	Determine the toxicity rating from the pesticide list:		
	*Is the toxicity rating "Caution" or "Warning"?	Yes	go to 5(c)
	*Is the toxicity rating "Danger"?	Yes	go to 5(d)
5 (c)	Is there a Group A or B water surface water system (WAC 246-290-020) intake	Yes	Class IV Sp
	OR a fish hatchery intake within one half mile downstream of the operation?	1/9	go to 5(e)
5 (d)	Is there a Group A or B water surface system intake OR a fish hatchery intake	Yes	Class IV Sp
	within 1 mile downstream of the operation?	No	go to 5(e)
5 (e)	Is the operation within 200 feet of the intake of a Group A or B spring water	Yes	Class IV Sp
	system?	186	go to 5(f)
5 (f)	Is the operation applying a pesticide in a Type A or B wetland?	Yes	Class IV Sp
		NO	go to 6(a)
6 (a)	Does any portion of the planned operation cover 240 or more contiguous acres?	Yes	Class IV Sp
	Pesticide treatment units will be considered contiguous if they are separated by	ক্টি	go to 6(b)
	less than 300 feet or treatment dates of adjacent units are less than 90 days		
	apart.		<u> </u>
6 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or	Yes	Class IV Sp
	critical habitat (State) of a species within the application area?	No.	go to 6(c)
6 (c)	If there is a special concern identified for this pesticide in the Board manual,	Yes	Class IV Sp
	does it apply to this application?	No	Class III

(1) Special concerns (see WAC 222-16-070 (2)6(c)) shall be evaluated by the department of agriculture. Information regarding special concerns shall be presented to the board for review. Approved special concerns shall be included in the board manual. Special concerns shall include situations where use of pesticides has the potential for a substantial impact on the environment, beyond those covered specifically in the key in subsection (2) of this section.

Easy Street



Forest Practices Application/Notification For Aerial Chemicals

For DNR Region Office Use Only							
FPAIN#: 2815964							
NW							
8-4-2017							
	2815964 NW						

USE THE INSTRUCTIONS TO COMPLETE THIS APPLICATION. TYPE OR PRINT IN INK:

1.	Landowner.	Timber Owner	, and Operator
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Legal Name of LANDOWNER	Legal Name of TIMBER OWNER	Legal Name of OPERATOR				
Sierra Pacific Industries	Sierra Pacific Industries	Sierra Pacific Industries				
Mailing Address:	Mailing Address:	Mailing Address:				
14353 McFarland Road	14353 McFarland Road	14353 McFarland Road				
City, State, Zip	City, State, Zip	City, State, Zip				
Mt. Vernon, WA 98273	Mt. Vernon, WA 98273	Mt. Vernon, WA 98273				
Phone (360) 424-7619	Phone (360) 424-7619	Phone (360) 424-7619				
Email:	Email:	Email:				

2.	Contactperson.	
	Contact Person:	Phone (360) 424-7619
	Doug Sand	Frank
		Email:

3. Are you substituting prescriptions from an approved state or federal conservation agreement or watershed analysis?

No. Yes. Write "Using prescriptions" in tables that apply, Attach or reference prescriptions/crosswalk on file,

4. Complete the following property description:

Unit Number	Acres	Section	Township	Range	East/West	County
1	65	13, 24	28	8	East	Snohomish
1	65	18, 19	28	9	East	Snohomish
			10		REC	EIVED NW REGION
						AUG 0 4 2017
				_		

5. Chemical Information - Show all buffers on your Activity Map**

									 	 	 	 	 	_	_
Conifer	Release (Anticipated year)	2017	2017							())					
Spring	-														
Site Prep							i								
thin:	100 feet of surface water?	Yes	Yes												
Are you spraying within:	200 feet of a residence?	2	No										ļ		
Are yo	100 feet of agricultural land?	8	8											_	
*List associated EPA		62719-527	2935-11001									24			
*Active Ingredient		trichovr	Modified Vegetable Oil Drift Control												
Acres	Treated	ű	3 55										iii.		
Unit Identifier (Must		-	-												

*Most active ingredients are sold under multiple brand names. Each brand has a different EPA number. One brand of each active ingredient is generally used at a time and brands may be substituted if listed above.

**Additional information may be added on separate pages as needed

6.	ls	this prop	osal: (<i>An</i>	swer every question)
	a.	⊠ No.	Yes.	Within the city limits or an urban growth area? If Yes, include SEPA Environmental Checklist or SEPA Determination or approved 10-year management plan
	b.	X No.	Yes.	Within a public park? If Yes, include SEPA Environmental Checklist or SEPA Determination
	C.	⊠ No.	Yes.	Within 500 feet of a public park? Park name:
	d.	⊠ No.	Yes.	For an Alternate Plan? If yes, include a copy of the Alternate Plan
	e.	⊠ No.	Yes.	Using a chemical that is not registered or for a use that is not allowed under the label? If yes, include a copy of your Experimental Use Permit and a SEPA Environmental Checklist
	f.	⊠ No.	Yes.	Applying a pesticide in a Type A or Type B Wetland? If Yes, include a SEPA Environmental Checklist or SEPA Determination
7.		re you sı No.	praying 24	40 or more contiguous acres? If Yes, include a SEPA Environmental Checklist.
8.	Ha Na	ve you re tive Ame	eviewed ti erican culf	his forest practices activity area to determine whether it may involve historic sites and/or tural resources? Read the instructions before answering this question.
		No.	Yes	•
9.	Ac	iditional	Informati	on (Attach additional pages if necessary):

Page 3

10. We acknowledge the following:

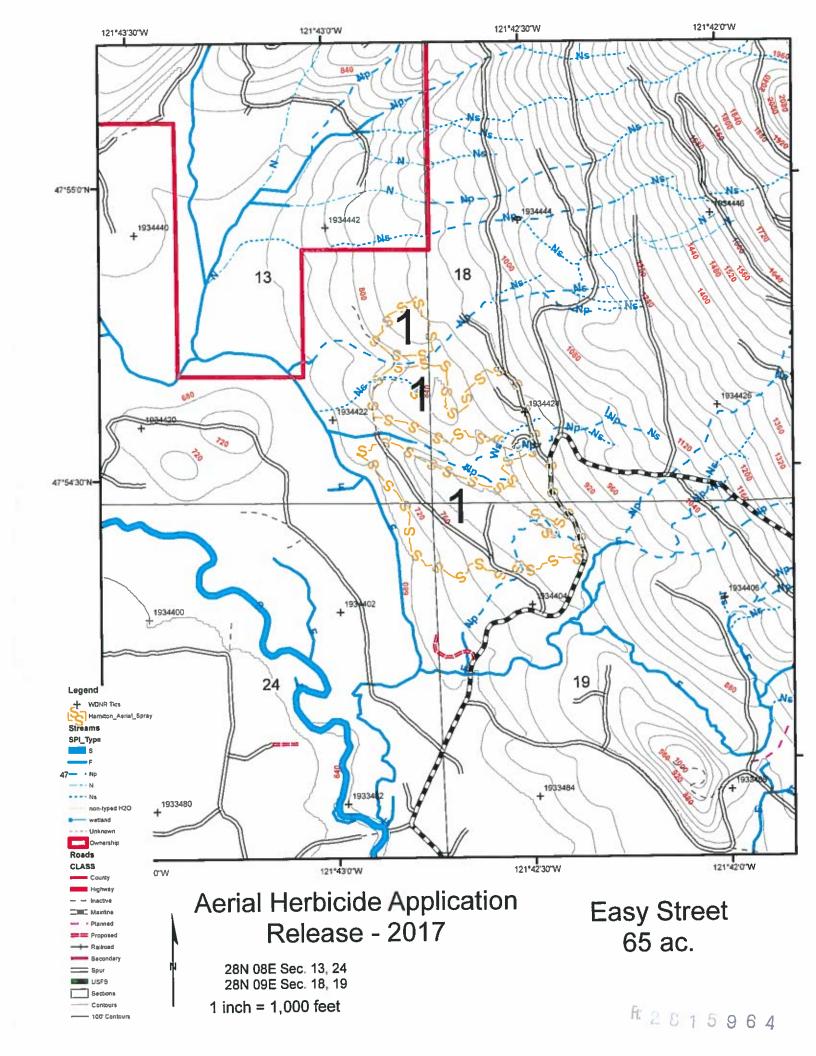
- The information on this application/notification is true.
- · We understand this proposed forest practice is subject to:
 - The Forest Practices Act and Rules AND
 - All other federal, state or local regulations.
- Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.
- The following may result in an unauthorized incidental take of certain endangered or threatened fish species:
 - Inadvertent Discovery Chapters 27.44, 27.53, 68.50 and 68.60 RCW
 - If you find or suspect you have found an archaeological object or Native American cairn, grave, or glyptic record, immediately cease disturbance activity, protect the area and promptly contact the Department of Archaeology and Historic Preservation at 360 586-3077.
 - o If you find or suspect you have found human skeletal remains, immediately cease disturbance activity, protect the area, and contact the County Coroner or Medical Examiner and local law enforcement as soon as possible. Failure to report human remains is a misdemeanor.

We understand that applying chemicals is not an activity included as part of the DNR's Incidental Take Permit for aquatic species. We affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules as well as all other federal, state or local regulations. Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.

The landowner understands that by signing and submitting this FPA, he/she is authorizing the Department of Natural Resources to enter the property in order to review the proposal, inspect harvest operations, and monitor compliance for up to three years after its expiration date. RCW 76.09.150

Signature of LANDOWNER	Signature of TIMBER OWNER (If different than landowner)	Signature of OPERATOR (If different than landowner)
Dougland Sundle		
Print Name: Douglas J. Sand Jr.	Print Name:	Print Name:
<u>Date:</u> 8-4-17	Date:	<u>Date:</u>

Aerial chemical revised 02-09-2017 Page 4





Forest Practices Application/Notification

FPA/N No:	2815964 8/31/2017					
Effective Date:						
Expiration Date:	8/31/2020					
Shut Down Zone:						
EARR Tax Credit:	[] Eligible [x] Non-eligible					
Reference:	Easy Street spray					

No	otice of Decision	EARR Tax Credit: Reference:	
Decision [] Notification [x] Approved [] Disapprove [] Closed FPA/N Classif [] Class II [x	This Forest Practices Applications This Forest Practices Applications Applicant has withdrawn FPA/N	on is subject to the conditions on is disapproved for the reas	
Notify the Depar Call (360) 856-3 legal description FOR YOUR INF Aerial chemical	Approval / Reasons for Disapproval treent of Natural Resources at least 48 but 500 for Forest Practices and the Skykomist of your operation. ORMATION: application areas need to be posted by the atment. Posting shall remain at least 15 days.	e landowner by signing at signific	provide the application number and cant points of regular access at least 5
Title:	Skykomish Forest Practice Forester [X] Landowner, Timber Owner and Ope [] Landowner [] Timber Owner [] Ope	erator.	

Appeal Information

You have thirty (30) days to appeal this Decision and any related State Environmental Policy Act determinations to the Pollution Control Hearings Board in writing at the following addresses:

Physical address: 1111 Israel Rd. SW, Ste 301, Tumwater, WA 98501

Mailing address: P.O. BOX 40903, OLYMPIA, WA 98504-0903

Information regarding the Pollution Control Hearings Board can be found at: http://www.eluho.wa.gov/

At the same time you file an appeal with the Pollution Control Hearings Board, also send a copy of the appeal to the Department of Natural Resources' region office and the Office of the Attorney General at the following addresses:

Office of the Attorney General Natural Resources Division 1125 Washington Street SE PO Box 40100 Olympia, WA 98504-0100

And

Department Of Natural Resources Northwest Region 919 N Township St Sedro-Woolley WA 98284

Other Applicable Laws

Operating as described in this application/notification does not ensure compliance with the Endangered Species Act, or other federal, state, or local laws.

Transfer of Forest Practices Application/Notification (WAC 222-20-010)

Use the "Notice of Transfer of Approved Forest Practices Application/Notification" form. This form is available at region offices and on the Forest Practices website: http://www.dnr.wa.gov/businesspermits/forestpractices. Notify DNR of new Operators within 48 hours.

Continuing Forest Land Obligations (RCW 76.09.060, RCW 76.09.070, RCW 76.09.390, and WAC 222-20-055)

Obligations include reforestation, road maintenance and abandonment plans, conversions of forest land to non-forestry use and/or harvest strategies on perennial non-fish habitat (Type Np) waters in Eastern Washington.

Before the sale or transfer of land or perpetual timber rights subject to continuing forest land obligations, the seller must notify the buyer of such an obligation on a form titled "Notice of Continuing Forest Land Obligation". The seller and buyer must both sign the "Notice of Continuing Forest Land Obligation" form and send it to the DNR Region Office for retention. This form is available at DNR region offices.

If the seller fails to notify the buyer about the continuing forest land obligation, the seller must pay the buyer's costs related to continuing forest land obligations, including all legal costs and reasonable attorneys' fees incurred by the buyer in enforcing the continuing forest land obligation against the seller.

Failure by the seller to send the required notice to the DNR at the time of sale will be prima facie evidence in an action by the buyer against the seller for costs related to the continuing forest land obligation prior to sale.

DNR affidavit of mailing:

On this day	9/1/2017	, I placed in the United States mail at	Sedro-Woolley	, WA,
(date)			(post office location)	
postage paid, a true and accurate copy of this document. Notice of De				
	L Utgard	_ S. Ulgr	use	
(Printed name)		(Signature)		

Revisions to FPA/N __2815964_

DATE	DOCUMENT	DESCRIPTION
10/9/2017	Transfer Form	Change of Operator
		- V
	+	
		2)
1		
	+	
		4
		-

RECEIVED OCT 06 2017 NW REGION

Forest Practices Application/Notification NOTICE OF TRANSFER

I/we transfer my/our rights, privileges, and obligations under this approved Forest Practices Application or Notification. I/we affirm that the information contained below is true and agree to comply with the rules authorized by the Forest Practices Act and to be bound by all conditions on the approved application or notification.

FPA/N Number:	2815964	_ Section(s):	18,19	_ Township: 28 Range: 9	<u> </u>		
Original Landowner (Signature):							
Original Landowner	(Printed):	Douglas J. S	and Jr.	Date: 09/08/2017	_		
	New Operator - Fill out this section only if you are changing or adding an operator						
Legal Name of New C	. , ,		Mailing Add	Iress:			
Wilbur-Ellis Agrib	usiness Division		P.O. Box 750				
Phone: (360) 262-3	3197		1 '	e, WA 98565			
Email:	/) 1		attn: Core	ey Fransen			
New Operator Signa	ture: With	7/_		Date: 9/18/17	7		
	- V - V - V - V - V - V - V - V - V - V			103-235-25			
New Lando	wner – Fill out this secti	ion <u>only</u> if you are	transferring	your FPA to a new landowner			
Legal Name of New L	andowner: (Print)		Mailing Add	Iress:			
Phone:			1				
Email:							
Ellian.			<u> </u>	Date:			
New Landowner Sig	nature:						
Legal Name of Timbe		his section <u>only</u> if	you are trans Mailing Add	sferring your timber rights			
Legal Name of Timbe	i Owner. (Print)		I Mailing Auc	11633.			
Phone:							
Email:							
Forest Tax Reporting Account Number: (Contact Dept. of Revenue to get this number: 1-800-548-8829)							
				Date:			
New Timber Owner	Signature:						
	9	10 mm					
M Received by: 5. (1919)							
(DNR Forest Practices Staff Signature)							